IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PERMIT# 80880 PIN# 4774238832 DATE 5-10-99

OWNER OR CONTRACTOR Phillip E. Smith PHONE: Business _____ Home 872 0223

ADDRESS 160 5th Creek Rd Statesville

LOCATION 64E TR New Salem 2 miles Rt

SUBDIVISION _____ BLOCK / SECTION _____ LOT _____ LOT AREA 4.74 acres SITE CLASS PS DESIGN FLOW 360 L.T.A.R. .125

Septic Tank: 1000 Gallons; STB 1012 Date 6-27-99
Pump Tank: _____ Gallons; PT _____ Date _____
Pump Make: _____ Model _____ Serial No. _____
Nitrification Field: No Fields 1 Square Feet 1440 Linear Feet 480
No Lines 3 Trench Width 36" Max Trench Bottom Depth 36" Gravel Depth 12"

☒ New System ☐ Repair System Type: I II III IV V VI
System Description: conv. Gravity
Repair System Description: Pump To Conv
Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home No. Bedrooms 3
☐ Mobile Home No. Bathrooms 2 1/2
☐ Business No. Employees _____
☐ Other _____

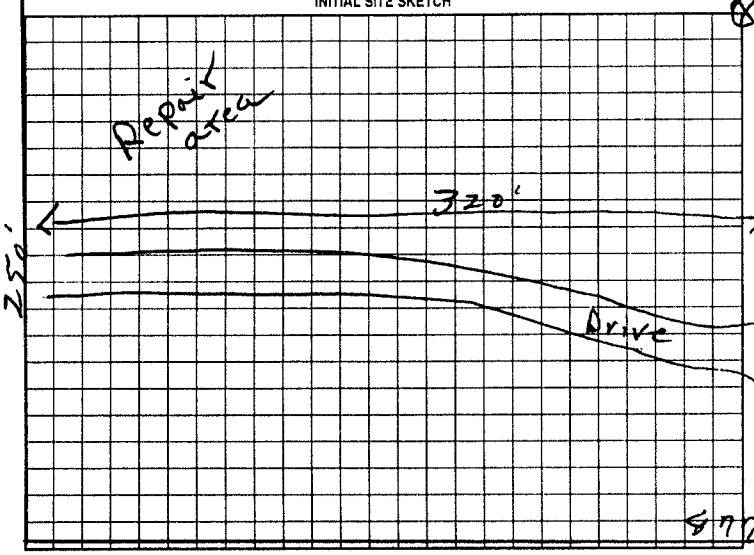
☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☒ Individual ☐ Public ☐ Community

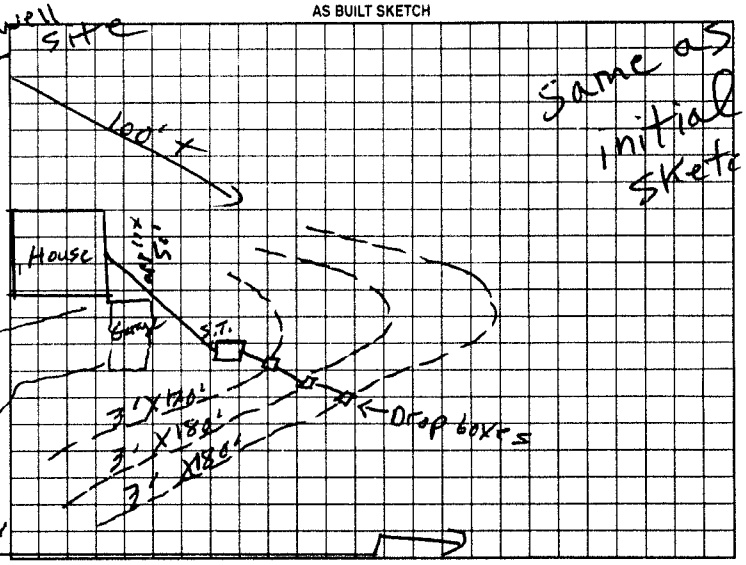
Comments/Conditions:
779'

Comments/Conditions

INITIAL SITE SKETCH



AS BUILT SKETCH



Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: X Phillip E. Smith date _____ Installed by: Tommy Frye

Improvement Permit by: R. C. Moore date 5-10-99 Operation Permit by: R. C. Moore date 9-7-99

Authorization to Construct by: R. C. Moore date 5-10-99 Existing System Inspection by: _____ date _____

HEALTH DEPT COPY: WHITE OWNER COPY (FINAL) YELLOW OWNER COPY (INITIAL) PINK